

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective January 1, 2003

Application or Docket Number

10677666

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

|   |              |              |
|---|--------------|--------------|
| TOTAL CLAIMS  | 8            |              |
| FOR   | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 8 minus 20 = |              |
| INDEPENDENT CLAIMS  | 1 minus 3 =  |              |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |              |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

10/5/05

|             |   |                                  |       |                                    |               |
|-------------|---|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT A |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | 7                                | Minus | 20                                 | 0             |
|             | Independent   | 1                                | Minus | 3                                  | 0             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

|           |        |    |           |        |
|-----------|--------|----|-----------|--------|
| RATE      | FEE    |    | RATE      | FEE    |
| BASIC FEE | 375.00 | OR | BASIC FEE | 750.00 |
| X\$ 9=    |        | OR | X\$18=    |        |
| X42=      |        | OR | X84=      |        |
| +140=     |        | OR | +280=     |        |
| TOTAL     |        | OR | TOTAL     | 750    |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

|                  |                 |    |                  |                 |
|------------------|-----------------|----|------------------|-----------------|
| RATE             | ADDI-TIONAL FEE |    | RATE             | ADDI-TIONAL FEE |
| X\$ 9=           |                 | OR | X\$18=           |                 |
| X42=             |                 | OR | X84=             |                 |
| +140=            |                 | OR | +280=            |                 |
| TOTAL ADDIT. FEE |                 | OR | TOTAL ADDIT. FEE |                 |

|             |   |                                  |       |                                    |               |
|-------------|---|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT B |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | 7                                | Minus | 20                                 | 0             |
|             | Independent   | 1                                | Minus | 3                                  | 0             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

|                  |                 |    |                  |                 |
|------------------|-----------------|----|------------------|-----------------|
| RATE             | ADDI-TIONAL FEE |    | RATE             | ADDI-TIONAL FEE |
| X\$ 9=           |                 | OR | X\$18=           |                 |
| X42=             |                 | OR | X84=             |                 |
| +140=            |                 | OR | +280=            |                 |
| TOTAL ADDIT. FEE |                 | OR | TOTAL ADDIT. FEE |                 |

|             |   |                                  |       |                                    |               |
|-------------|---|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT C |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   |                                  | Minus |                                    |               |
|             | Independent   |                                  | Minus |                                    |               |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

|                  |                 |    |                  |                 |
|------------------|-----------------|----|------------------|-----------------|
| RATE             | ADDI-TIONAL FEE |    | RATE             | ADDI-TIONAL FEE |
| X\$ 9=           |                 | OR | X\$18=           |                 |
| X42=             |                 | OR | X84=             |                 |
| +140=            |                 | OR | +280=            |                 |
| TOTAL ADDIT. FEE |                 | OR | TOTAL ADDIT. FEE |                 |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.